FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	UNGAINI	_	
	(See instru	ctions)	Office use only
NAME OF COMMITTEE (in	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5
Society for R	elief of Distressed and Decaye	d Pilots Political Action	
ADDRESS (number and	c/o T. J. Tumola,	Duane Morris LLP	
(Check if add	30 South 17th Str	eet 	
is changed)	Philadelphia		PA 19103 - 4196
		CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MA	anemorris.com		
COMMITTEE'S WEE	PAGE ADDRESS (URL)		
	<u> </u>		
COMMITTEE'S FAX 2159791020	NUMBER		
2. DATE 0 .	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		
3. FEC IDENTIFIC	ATION NUMBER	C C00240457	
4. IS THIS STATE	MENT NEW (N) OI	AMENDED (A)	
I certify that I have exam	nined this Statement and to the best of my	knowledge and belief it is true, correct	and complete
Type or Print Name o	f Treasurer Thomas J. T u	mola, Asst. Treas.	
Signature of Treasure	_{or} Electronically Filed by Thoma	s J. Tumola, Asst. Treas.	Date 05 / DD / YYYYY
NOTE: Submission of f	·	may subject the person signing this S	tatement to the penalties of 2 U.S.C. S437g. D WITHIN 10 DAYS
Office Use Only		For further information Federal Election Comm Toll Free 800-424-953	ission FEC FORIVI 1

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5.	TYPE OF COMMITTEE (Check One)	
	(a) This committee is a principal campaign committee. (Complete the candidate information below.) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the campaign committee) information below.)	andidate
	Name of Candidate	
	Candidate Party Affiliation Office Sought: House Senate President	State District
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
		emocratic, publican,etc.) Party.
	committee.	id of party
ŝ.	Name of Any Connected Organization or Affiliated Committee	
	The Society for Relief of Distressed and Decayed Pilots	
L		
	Mailing Address 800 S. Columbus Blvd.	
	Philadelphia PA 19	147
	CITY▲ STATE▲ 2	ZIP CODE A
	Relationship Connected	
	Type of Connected Organization:	
	Corporation X Corporation w/o Capital Stock Labor Organization	n
	Membership Organization Trade Association Cooperative	

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٧	Vrite or Type Committe	e Name					
	Society for Relie	ef of Distressed and Dec	ayed Pilots Polition	cal Action Committee			
7.		ds: Identify by name, ad mmittee books and record		ber optional), and pos	sition of th	e person in	
	Full Name	Michael J Linton					
	Mailing Address	800	South Columbus	Blvd.			
		Phil	ladelphia	P	<u> </u>	19147_	
	Title or Position ▼		CITY A	STA	TE▲	ZIP COI	DE A
	Ch	airperson		Telephone number	215	465 	2856
	Full Name of Treasurer Mailing Address	Thomas S Branin 800	South Columbus	Blvd.			
		Phil	ladelphia		<u> </u>	19147	
	Title or Position ♥		CITY A	STA	TE▲	ZIP CO	DE 🛦
	Tre	easurer		Telephone number	609	428	6579
	Full Name of Designated Agent	Thomas J. Tumola, Ass	st. Treas.				
	Mailing Address	Dua	ane Morris LLP				
		30 \$	South 17th Street				
		Phil	ladelphia		<u> </u>	19103 _	4196
	Title or Position ▼		CITY A	STA	TE ▲	ZIP COI	DE A
	As	sistant Treasurer		Talanhana ann d	215	979	1286

Telephone number

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9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc.			ints, rents
	PNC Ba	ank 9th & Walnut Streets	
		Philadelphia PA 191	107 -

STATE ∠

ZIP CODE △

CITY 🛆

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Banks or Other Depositor safety deposit boxes or main	ntains funds.	posits funds, holds accounts, rents
Name of Bank, Depository,	etc.	[ADDITIONAL]
Mailing Address		
	CITY 🛆	STATE ZIP CODE A
Name of Any Connected	Organization or Affiliated Committee	[ADDITIONAL]
Mailing Address		
Walling Address		
		1 . 1 . 1
	CITY▲	STATE ▲ ZIP CODE ▲
Relationship		
Type of Connected Organiz		
Type of Confidence Cryains	zation:	
Corporation	zation: Corporation w/o Capital Stock	Labor Organization

Designated Agent			[ADDITIONAL]
Full Name Michael	J Linton		
Mailing Address	800 South Columbus Blvd	I.	
-			
-	Philadelphia	PA	19147
Title or Position ♥	CITY A	STATE▲	ZIP CODE A
Chairperson		Z15 Telephone number	5 465 2856

Baratas an Ottom Baras attend	± 1/2001)	Page 7 / 8
Banks or Other Depositoric safety deposit boxes or main	tains funds.	unds, holds accounts, rents
Name of Bank, Depository, e	AC.	[//55///5///1]
Mailing Address		
	CITY 🛆 STATE	∠ ZIP CODE △
Name of Any Connected (Organization or Affiliated Committee	
		[ADDITIONAL 1
		[ADDITIONAL]
		[ADDITIONAL]
		[ADDITIONAL]
Mailing Address		[ADDITIONAL]
Mailing Address		
Mailing Address		
Mailing Address		
Mailing Address	CITY A STATE	
Mailing Address Relationship		
	CITY A STATE	
Relationship	CITY A STATE	

Designated Agent	[ADDITIONAL]
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Full Name Thomas S B	ranin		
Mailing Address	800 South Columbus	Blvd.	
	Philadelphia		19147
Title or Position ♥	CITY A	STATE▲	ZIP CODE A
Treasurer		Telephone number	428 6579